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**Before the House Committee on Government Reform  
Subcommittee on Criminal Justice, Drug Policy, and Human Resources  
Chairman Mark E. Souder, 109<sup>th</sup> Congress**

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Chairman Souder, Ranking Member Cummings, and distinguished Members of the Subcommittee: thank you for the opportunity to appear before you today to discuss our national efforts against methamphetamine.

The issue of methamphetamine is one with which I am well acquainted. Prior to being nominated and confirmed in my present position, I worked as an elected prosecutor in Iron County, Utah where methamphetamine use, sales, and production were a problem. In 16 years as a prosecutor in a rural county, I learned about the destructive nature of methamphetamine first-hand by working frequently with police officers who were put at risk by having to respond to, enter, and “sit on” methamphetamine labs; by meeting with innocent neighbors who lived near houses turned into methamphetamine labs; and by discovering children whose parents were found to be under the influence of methamphetamine, and suffered neglect as a result.

Methamphetamine is undeniably a uniquely destructive drug. I am grateful for the opportunity to play a role in addressing the methamphetamine problem in my current position as co-chair of the Administration’s government-wide coordinating committee for policy regarding methamphetamine and other synthetic drugs—the Synthetic Drugs Interagency Working Group. In my testimony, I hope to accomplish two things: one, to provide an update on our fight against methamphetamine and two, describe the way ahead in sustaining a coordinated response to methamphetamine use, production and trafficking.

As the committee is aware, the President’s *National Drug Control Strategy* is a balanced approach to reducing drug use by focusing on three national priorities: Prevention, Treatment, and Market Disruption. The goal is to reduce illicit drug use in America by at least five percent each year, both in the youth-only category, and for Americans as a whole. As the committee is also aware, we are pleased that we have exceeded this goal with respect to young people: total drug use among eighth, tenth, and twelfth graders is down 17 percent over the last three years.

Our strategy to reduce drug use in America is not focused on one illicit drug at the expense of another, but seeks to reduce all illicit drug use. However, officials at ONDCP, the Department of Health and Human Services, and the Department of Justice realize that methamphetamine, illicitly used prescription drugs, and club drugs – collectively referred to as synthetic drugs – pose a unique challenge, and constitute an emerging problem. For that reason, the Administration began new work on a comprehensive plan to attack the methamphetamine

problem. The plan, called the *National Synthetic Drugs Action Plan*, was published in October, 2004, and released by the Administration along with Members of Congress at the site of a small toxic lab in rural Missouri. That document is what guides our national efforts to curb methamphetamine use and production.

As the Administration moves forward to implement and refine the various recommendations within the *Action Plan*, we have begun to see age and geographic trends. Our drug abuse survey instruments suggest different use patterns by various segments of the population. The increase in treatment entries for methamphetamine over the past two years, especially in Western and Mid-Western states, illustrates the devastating impact of the drug on many adults. However, we are pleased methamphetamine use among teens is down 25 percent over the past three years.

After the implementation of a major operation in cooperation with our Canadian counterparts to target rogue chemical companies and distribution channels to choke off the supply of precursor chemicals to domestic “superlabs” (methamphetamine labs with a production capacity exceeding 10 pounds within a 24-hour period), the number of superlabs detected by law enforcement fell from 142 in 2002 and 132 in 2003 to just 55 in 2004 and seizures of pseudoephedrine at our northern border, another focus of that operation, are now down by 92 percent. Additionally, rural drug use in 2003, the last year for which we have data, was down 54 percent (this is for all illicit drugs, but methamphetamine is known to be a particular problem in rural areas).

The conclusions we draw from these preliminary data are not that our efforts to address the methamphetamine problem can now be relaxed, but rather, that by continuing to implement our comprehensive and balanced effort, we can see further reductions in both methamphetamine use and production.

The methamphetamine production problem exists on two levels: the large-scale level, at which superlabs (increasingly operating outside of our borders) receive bulk smuggled pseudoephedrine and convert it, together with other precursor chemicals, into the drug; and the small-scale level, at which small to medium labs create the drug using pseudoephedrine products purchased or diverted at the retail or wholesale level.

In targeting the large-scale methamphetamine production described above, the Department of Justice, primarily acting through the Drug Enforcement Administration, is the lead with respect to Mexico – a major producer or transshipment point for much of the methamphetamine entering America.

- DEA officials recently negotiated an arrangement with top officials from Hong Kong, Panama and Mexico. Additionally, various information-sharing arrangements have been negotiated with the countries that supply the largest amounts of otherwise-legal chemicals used in making methamphetamine: China and India.
- DEA has provided training, equipment, and other assistance to Mexican law enforcement so Mexico can more effectively target methamphetamine labs.

- The Administration has successfully worked with online sites, such as eBay, to reduce or eliminate the uncontrolled online sales of chemicals used to make methamphetamine.
- DEA's Operation Northern Star, coupled with Canada's implementation of its laws through regulations effective in January 2003, is continuing demonstrate significant success. A critical objective in 2002 and 2003 was to reduce the illicit flow of methamphetamine precursors into Canada and then down in the United States. After Operation Northern Star began, seizures of those chemicals slowed dramatically.
- At the same time, Department of Homeland Security agencies and DEA have stepped up enforcement efforts on the Southwest Border and have seized record amounts of methamphetamine at the Southwest Border. Through DEA's leadership, we have launched other operations designed to stifle the illegal international flow of chemicals used to make methamphetamine. For example, Project Prism, initiated six months after President Bush took office, has 37 participating countries and five international organizations. Since March 2004, Project Prism has used pre-export notifications to monitor 420 shipments of ephedrine totaling 330,000 kilograms, 1,600 shipments of pseudoephedrine totaling 3,800,000 kilograms, 772 shipments of pharmaceutical preparations containing ephedrine or pseudoephedrine, 10 shipments of phenyl-2-propanone involving 18,000 kilograms, and one shipment of 3,4-methylenedioxyphenyl-2-propanone totaling 4,000 kilograms. Approximately 5,163 kilograms of 60 milligram tablets of pseudoephedrine have been seized in the United States, Mexico, and Panama under Project Prism, having a capability to yield 3,098 kilograms of methamphetamine at a 60 percent conversion rate.

One of the most critical aspects of our efforts over the next several months will be to continue the process of negotiation and information-sharing with our partner nations whose businesses legitimately supply pseudoephedrine products to the United States, Mexico, Canada and other countries. In short, the more information that DEA and other Administration officials have about international pseudoephedrine shipments, the better we can ensure that these shipments are not diverted to methamphetamine labs for nefarious purposes.

Meanwhile, the Administration continues to provide assistance to state and local partners working hard to address their local methamphetamine problem through efforts related to treatment, prevention and market disruption.

- The "Drug Endangered Children" program was created during the President's first term, and exists with Federal support to help children adversely affected by methamphetamine-using adults. Twenty-five states now have DEC programs, and the Administration continues to work with interested states to expand this program.
- The Administration requested \$167.7 million for methamphetamine enforcement, interdiction, and cleanup from FY 2002 through FY 2006.
- Administration officials have met with representatives from companies which manufacture otherwise-legal products used in the production of methamphetamine,

encouraging them to voluntarily restrict their sales. Several large companies, including Pfizer, Rite-Aid, McNeil and Target, voluntarily adopted restrictions.

- The Administration is in the process of revising the Guidelines for the Cleanup of Clandestine Drug Laboratories, 2005 edition, the so-called "Red Book" which includes voluntary standards, lessons learned, and best practices for methamphetamine laboratory cleanup as well as for the removal of source chemicals found at methamphetamine and other clandestine laboratory sites by federal, state, or local law enforcement and environmental officials.
- The President's FY 2006 drug control budget is up 2.2 percent with increases in areas vital to the methamphetamine effort – treatment programs, domestic law enforcement, interdiction, and international efforts. The portion of the drug control budget dealing with treatment is up 4.5 percent; drug enforcement is up 2.1 percent; interdiction is up 8.2 percent, and international efforts are up 21.4 percent.

We have also continued, at unprecedented levels, to stopping drug use before it starts and to heal America's drug users. Methamphetamine addiction can be treated, but in some cases, a longer time period and in-patient treatment is required to successfully enter recovery. The Administration has proposed increased support for state and local drug treatment across America over the last several years.

- The FY 2006 budget requests \$150 million – an increase of \$50.8 million for Access to Recovery, a voucher-based treatment grant program which can support individuals seeking treatment for methamphetamine addiction.
- The budget also requests a total of \$70 million – an increase of more than \$30 million – for the Drug Courts Program, which almost entirely goes to support state and local drug court services, many or all of which are able to monitor persons before the court for possession of methamphetamine.
- The budget requests \$25.4 million – a \$15.4 million increase – for Student Drug Testing, to ensure that already-seen reductions in methamphetamine use among teens (25 percent in three years) continues as a trend.
- HHS is supporting several research and data-related efforts to better understand the best way to treat people suffering from abuse of and addiction to methamphetamine and other synthetic drugs – and make that information available to state and local partners.

We believe that the principles in the President's *National Drug Control Strategy* are important in any consideration of addressing a drug threat: to balance prevention, treatment, and market disruption. In the case of methamphetamine, ensuring that would-be methamphetamine cooks are unable to gain access to the ingredients they need to make the drug is of critical importance. Some control over consumer access to pseudoephedrine products can help to do that, though such control must also always be balanced against legitimate consumer access to these products. A number of States have approached this challenge in different ways, taking into account their

individual law enforcement and consumer access needs. Early data indicate that several States which have done this through individual legislative and regulatory initiatives appear to have seen real reductions in the number of methamphetamine labs in their states. It is essential to deny methamphetamine cooks the ability to gather the ingredients they need while balancing the need of law abiding citizens to be able to access these commonly used cold products.

Thank you again for the opportunity to testify on this important topic, and I welcome any questions the Subcommittee may have regarding methamphetamine and the Administration's efforts to reduce its use, production and trafficking.